

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re Lehman Brothers Holdings Inc. *et al.*, Debtors.

Case No. 08-13555 (JMP)

TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

Alden Global Distressed
Opportunities Master Fund, LP
Name of Transferee

Deutsche Bank AG, London Branch
Name of Transferor

Name and Address where notices to transferee
should be sent:

Court Claim #: See Schedule
Total Allowed Amount
to be Transferred: See Schedule

Alden Global Distressed
Opportunities Master Fund, LP
c/o Alden Global Capital, LLC
885 Third Avenue, 34th Floor
New York, NY 10022
Attention: Ithran Olivacce
E-mail: iolivacce@aldenglobal.com

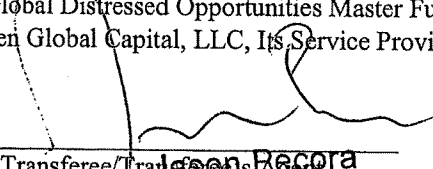
Phone: 212-888-7214

Wire instructions:

Name of Bank: Wells Fargo N.A.
ABA: 121 000 248
SWIFT: WFBIUS6S
Account #: 2000039124162
Account Name: Alden Global Distressed Opportunities Master Fund, LP

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

Alden Global Distressed Opportunities Master Fund, LP
By: Alden Global Capital, LLC, Its Service Provider

By: 

Transferee/Transferor's Agent
Jason Recora
Managing Director - Operations
Alden Global Capital

Date: February 18, 2015

Penalty for making a false statement: Up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 & 3571.

AGREEMENT AND EVIDENCE OF TRANSFER OF CLAIM
LEHMAN PROGRAM SECURITY

TO: THE DEBTOR AND THE BANKRUPTCY COURT

1. For value received, the adequacy and sufficiency of which are hereby acknowledged, **DEUTSCHE BANK AG, LONDON BRANCH** ("**Seller**") hereby unconditionally and irrevocably sells, transfers and assigns to **ALDEN GLOBAL DISTRESSED OPPORTUNITIES MASTER FUND, LP** (the "**Purchaser**"), and Purchaser hereby agrees to purchase, as of the date hereof, (a) an undivided interest, to the extent of the applicable percentage specified in Schedule 1 hereto, in Seller's right, title and interest in and to the Proofs of Claim 47617, 48658 and 45318 filed by or on behalf of any of Seller's predecessors-in-title (copies of which are attached at Schedule 2 hereto) (the "Proofs of Claim") as is specified in Schedule 1 hereto (the "Purchased Portion") against Lehman Brothers Holdings, Inc., as guarantor of the Purchased Security (as defined below) and debtor in proceedings for reorganization (the "Proceedings") in the United States Bankruptcy Court for the Southern District of New York (the "Court"), administered under Case No. 08-13555 (JMP) (the "Debtor"), (b) all rights and benefits of Seller relating to the Purchased Portion, including without limitation (i) any right to receive cash, securities, instruments, interest, damages, penalties, fees or other property, which may be paid or distributed with respect to the Purchased Portion or with respect to any of the documents, agreements, bills and/or other documents (whether now existing or hereafter arising) which evidence, create and/or give rise to or affect in any material way the Purchased Portion, whether under a plan or reorganization or liquidation, pursuant to a liquidation, or otherwise, (ii) any actions, claims (including, without limitation, "claims" as defined in Section 101(5) of Title 11 of the United States Code (the "Bankruptcy Code")), rights or lawsuits of any nature whatsoever, whether against the Debtor or any other party, arising out of or in connection with the Purchased Portion, (iii) any rights and benefits arising out of or in connection with any exhibit, attachment and/or supporting documentation relating to the Purchased Portion, and (iv) any and all of Seller's right, title and interest in, to and under the transfer agreements, if any, under which Seller or any prior seller acquired the rights and obligations underlying or constituting a part of the Purchased Portion, but only to the extent related to the Purchased Portion, (c) any and all proceeds of any of the foregoing (collectively, as described in clauses (a), (b), and (c), the "Transferred Claims"), and (d) the security or securities (any such security, a "Purchased Security") relating to the Purchased Portion and specified in Schedule 1 attached hereto.

2. Seller hereby represents and warrants to Purchaser that: (a) the Proofs of Claim were duly and timely filed on or before 5:00 p.m. (prevailing Eastern Time) on November 2, 2009 in accordance with the Court's order setting the deadline for filing proofs of claim in respect of "Lehman Program Securities"; (b) the Proofs of Claim relate to one or more securities expressly identified on the list designated "Lehman Programs Securities" available on <http://www.lehman-docket.com> as of July 17, 2009; (c) Seller owns and has good and marketable title to the Transferred Claims, free and clear of any and all liens, claims, set-off rights, security interests, participations, or encumbrances created or incurred by Seller or against Seller; (d) Seller is duly authorized and empowered to execute and perform its obligations under this Agreement and Evidence of Transfer; (e) the Proofs of Claim include the Purchased Portion specified in Schedule 1 attached hereto; (f) Seller has not engaged in any acts, conduct or omissions, or had any relationship with the Debtor or its affiliates, that will result in Purchaser receiving in respect of the Transferred Claims proportionately less payments or distributions or less favorable treatment than other general unsecured creditors holding claims of the same class and type as the Purchased Portion; (g) the Transferred Claims are Class 5 claims; and (h) Seller's respective predecessor-in-title received in respect of the Transferred Claims and/or the Purchased Security distributions as set out in Schedule 1.

3. Seller hereby waives any objection to the transfer of the Transferred Claims to Purchaser on the books and records of the Debtor and the Court, and hereby waives to the fullest extent permitted by law any notice or right to receive notice of a hearing pursuant to Rule 3001(e) of the Federal Rules of Bankruptcy Procedure, the Bankruptcy Code, applicable local bankruptcy rules or applicable law, and consents to the substitution of Seller by Purchaser for all purposes in the case, including, without limitation, for voting and distribution purposes with respect to the Transferred Claims. Purchaser agrees to file a notice of transfer with the Court pursuant to Federal Rule of Bankruptcy Procedure 3001(e) including this Agreement and Evidence of Transfer of Claim. Seller acknowledges and understands, and hereby stipulates, that an order of the Court may be entered without further notice to Seller transferring to Purchaser the Transferred Claims, recognizing Purchaser as the sole owner and holder of the Transferred Claims, and directing that all payments or distributions of money or property in respect of the Transferred Claim be delivered or made to Purchaser.

4. All representations, warranties, covenants and indemnities shall survive the execution, delivery and performance of this Agreement and Evidence of Transfer of Claim and the transactions described herein. Purchaser shall be entitled to transfer its rights hereunder without any notice to or the consent of Seller. Seller hereby agrees to indemnify, defend and hold Purchaser, its successors and assigns and its officers, directors, employees, agents and controlling persons harmless from and against any and all losses, claims, damages, costs, expenses and liabilities, including, without limitation, reasonable attorneys' fees and expenses, which result from Seller's breach of its representations and warranties made herein.

5. Seller shall promptly (but in any event no later than three (3) business days) remit any payments, distributions or proceeds received by Seller from 1 October 2013 onwards in respect of the Transferred Claims to Purchaser. Seller has transferred, or shall transfer as soon as practicable after the date hereof, to Purchaser each Purchased Security to such account, via Euroclear or Clearstream (or similar transfer method), as Purchaser may designate in writing to Seller. This Agreement and Evidence of Transfer supplements and does not supersede any confirmation, any other automatically generated documentation or any applicable rules of Euroclear or Clearstream (or similar transfer method) with respect to the purchase and sale of the Purchased Security.

6. Each of Seller and Purchaser agrees to (a) execute and deliver, or cause to be executed and delivered, all such other and further agreements, documents and instruments and (b) take or cause to be taken all such other and further actions as the other party may reasonably request to effectuate the intent and purposes, and carry out the terms, of this Agreement and Evidence of Transfer, including, without limitation, cooperating to ensure the timely and accurate filing of any amendment to the Proofs of Claim.

7. Seller's and Purchaser's rights and obligations hereunder shall be governed by and interpreted and determined in accordance with the laws of the State of New York (without regard to any conflicts of law provision that would require the application of the law of any other jurisdiction). Seller and Purchaser each submit to the jurisdiction of the courts located in the County of New York in the State of New York. Each party hereto consents to service of process by certified mail at its address listed on the signature page below.

IN WITNESS WHEREOF, this AGREEMENT AND EVIDENCE OF TRANSFER OF CLAIM is executed this 23rd day of December 2014.

DEUTSCHE BANK AG, LONDON BRANCH

By: 
Name: _____
Title: _____

Jamie Foote
Vice President

By: 
Name: _____
Title: _____

Simon Glennie
Vice President

Winchester House
1, Great Winchester Street
London EC2N 2DB
ENGLAND
Attn: Michael Sutton

ALDEN GLOBAL DISTRESSED
OPPORTUNITIES MASTER FUND, LP

By: Alden Global Capital, LLC Its Service Provider

By: 
Name: Jason Pecora
Title: Managing Director

Alden Global Capital
885 Third Avenue
34th Floor New York
New York 10022
Attn: Ithran Olivacce

Schedule 1

Transferred Claims

Purchased Portion

- 100.00 % of the claim that is referenced in Proof of Claim 47617 (as highlighted in the copy attached at Schedule 2) and relating to the first Purchased Security described below (plus all interest, costs and fees relating to this claim).
- 100.00 % of the claim that is referenced in Proof of Claim 48658 (as highlighted in the copy attached at Schedule 2) and relating to the second Purchased Security described below (plus all interest, costs and fees relating to this claim).
- 100.00 % of the claim that is referenced in Proof of Claim 45318 (as highlighted in the copy attached at Schedule 2) and relating to the third Purchased Security described below (plus all interest, costs and fees relating to this claim).

Lehman Programs Securities to which Transfer Relates

Proof of Claim	Description of Security	ISIN/CUSIP	Blocking Number	Issuer	Guarantor	Principal/Notional Amount	Maturity	Allowed Claim Amount	Aggregate amount of 2 nd -6 th LBIH distributions	Aggregate LBIH Distributions
47617	MTN5878	XS0282208049	CA01150	Lehman Brothers Treasury Co. BV	Lehman Brothers Holdings, Inc.	€350,000.00	2/9/2012	\$496,687.02	\$79,938.58	€79,268.08
48658	MTN5878	XS0282208049	CA01136	Lehman Brothers Treasury Co. BV	Lehman Brothers Holdings, Inc.	€2,000,000.00	2/9/2012	\$2,838,211.54	\$456,522.97	€452,960.44
45318	MTN5878	XS0282208049	CA01151	Lehman Brothers Treasury Co. BV	Lehman Brothers Holdings, Inc.	€2,500,000.00	2/9/2012	\$3,547,764.43	\$699,038.11	€566,200.55

1 Includes a catch-up distribution of \$128,046.94

DB Ref: 13626


Confidential Schedule 1-1

Schedule 2

Copy of Proofs of Claim 47617, 48658 and 45318

Confidential/Schedule 1-1

DB Ref: 13626

United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		LEHMAN SECURITIES PROGRAMS PROOF OF CLAIM	
In Re: Lehman Brothers Holdings Inc., et al., Debtors.		Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009		Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000047617 	
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) COLINA BEDAT, S.L. CALLE ALBUERA, 13, ESC.2 - 1ºB, 41001 SEVILLA (SPAIN)		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____	
Telephone number: _____ Email Address: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where payment should be sent (if different from above) Telephone number: 0034667855249 Email Address: ELENAHIDURIE@COLINABEDAT.ES			
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates. Amount of Claim: \$ 495,285.00 \$ _____ (Required) EURUSD X-Rate Applied: 1.4151 (09/15/08) ECB <input type="checkbox"/> Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.			
2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the ISINs for the Lehman Programs Securities to which this claim relates. International Securities Identification Number (ISIN): XS0282208049 (Required)			
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates. Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number: CA01150 (Required)			
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number: CLEARSTREAM 16632 (Required)			
5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.		FOR COURT USE ONLY FILED / RECEIVED OCT 27 2009 EPIQ BANKRUPTCY SOLUTIONS, LLC	
Date: 2/10/09 Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number, if different from the notice address above. Attach copy of power of attorney, if any. COLINA BEDAT, S.L. C.I.F. B-91.226.167			
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571			

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The questions on the Proof of Claim form include instructions for completing each question. The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS

Debtor

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is the person, corporation, or other entity owed a debt by the debtor on the date of the bankruptcy filing.

Claim

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured, reduced to judgment or not, liquidated or unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal or equitable

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the Claims Agent at the following address:

**Lehman Brothers Holdings Claims Processing
c/o Epiq Bankruptcy Solutions, LLC
FDR Station, PO Box 5076
New York, NY 10150- 5076**

Lehman Programs Security

Any security included on the list designated "Lehman Programs Securities" available on <http://www.lehman-docket.com> as of July 17, 2009.

INFORMATION

Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim, or you may access the Claims Agent's system (<http://www.lehman-docket.com>) to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

04/2005 SPECIAL NOTARIAL PAPER

6F4516362

Pedro Antonio Romero Candau
Notary Public
Plaza de la Magdalena, 9 – 3
Tel: 422 63 00 – Fax: 4225655

[SEAL: NOTARY OFFICE OF PEDRO

[stamp: €0.15]

ANTONIO ROMERO CANDAU, SEVILLE)

NUMBER THREE THOUSAND TWO HUNDRED AND SIXTY THREE.-----

-----DEED OF POWER OF ATTORNEY-----

AT SEVILLE, on the twenty seventh of June of Two Thousand and Five.-----

Before me, PEDRO ANTONIO ROMERO CANDAU, Notary Public of the Notary
Association of Seville. -----

----- APPEARING -----

TERESA RELINQUE CHACON, of legal age, married, resident of Seville,
with address at calle Cristo del Calvario, number 5, 2 derecha and with D.N.I. (national
identification document) and N.I.F. (tax identification number) 28222477-M which I
have verified.-----

I know the party appearing personally. -----

APPEARING: for and on behalf of "COLINA BEDAT, SOCIEDAD DE
RESPONSABILIDAD LIMITADA", a company of indefinite duration with its
registered office at calle Cristo del Calvario, number 5, 2 derecha, Seville, which was
constituted by virtue of the deed executed before me on the twenty sixth of July of two
thousand and two with protocol number 4047, registered in the Companies Registry of
Seville in volume 3530, folio 171, page number SE-49550, entry 1, and with



C.I.F.(Corporate Tax Identification Number) B-91226167.-----

The above party has the legal capacity required to execute this deed by virtue of:-----

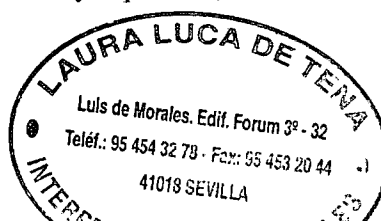
- a) Her position as Chairwoman of the Board of Directors of the Company, with such appointment, acceptance and registration being recorded in the deed of constitution mentioned above.-----
- b) By agreement of the Board of Directors adopted at its meeting held on the twenty fourth of June of two thousand and five, as evidenced by the certificate issued by Magdalena Haurie Relinque, Secretary of the Board of Directors, with the approval of the Chairwoman Teresa Relinque Chacón which I have seen and authenticate following comparison of the signatures with other duly authenticated signatures. This certificate is annexed to this master copy and as many copies shall be made of the same as are made of this deed.-----

The party appearing has confirmed to me the legal status of the company which she represents and that the powers which she holds are in full effect.

Assessment by the authorising Notary Public as to the authority of the executor of this deed: I, the Notary Public, after examining the documents mentioned above and which are annexed to this deed as I deem appropriate, consider that the party appearing has due authority to execute this deed of **power of attorney**.-----

== WITH THE FOLLOWING TERMS ==

This power of attorney is granted in favour of MARIA ELENA HAURIE RELINQUE, of legal age, lawfully separated, resident of Seville, with address at calle



04/2005 SPECIAL NOTARIAL PAPER 6F4516361
[SEAL: NOTARY OFFICE OF PEDRO [STATE STAMP] [stamp: €0.15]
ANTONIO ROMERO CANDAU, SEVILLE)

Marqués de Paradas, number 18, 1, E, with D.N.I. (national identification document)
number 28759491-S to exercise the following powers for and on behalf of the company
COLINA BEDAT, S.A: -----

== = POWERS == =

- 1) To carry out any operations in relation to the current accounts of the grantor company, including to sign cheques and other documents drawn against the company; to make deposits and withdrawals; to draw, endorse, intervene in or issue cheques, promissory notes, bills of exchange or other money order documents; to formalise, modify or cancel contracts to open deposits, current accounts, term deposits or any other similar contract; to request certification or details of any bank statements of the company; to rent safety deposit boxes or terminate any such contracts; to establish direct debits or credit transfers for payments and deposits; to make or receive transfers; to request, obtain or cancel credit or debit cards in favour of the grantee of this power of attorney, the company or any other person related with the same; to constitute, modify and cancel contracts for the deposit of securities, fixed, variable or mixed income funds or of any other type; to formalise, modify and cancel lease, rental or factoring agreements or of any other kind; to charge fees for collection or payment of any kind of service or obligation assumed by the company or in favour of the same and in general to carry out any of the typical operations,



whether credit or debit operations, with credit entities and for any amount, with the exception of those regarding constitution of loans with or without security. ----

-----EXECUTION-----

After having read this deed in accordance with article 193 of the Notarial Regulations, I have advised the party appearing of the matters required by law, following which she has **accepted** its terms and affixed her **signature** -----

-----AUTHORISATION-----

I HEREBY CERTIFY the entire content of this public instrument issued on two sheets of notarial paper with the official state stamp, series 6D, numbers 7577470 and the following pages numbered consecutively . -----

[This document has been signed by the party appearing. Signed:Pedro Romero Candau- Sealed – The Notary Public's seal is affixed]-----

-----ANNEXED DOCUMENTS-----



04/2005 SPECIAL NOTARIAL PAPER 6F4516360
[SEAL: NOTARY OFFICE OF PEDRO [STATE STAMP] [stamp: illegible]
ANTONIO ROMERO CANDAU, SEVILLE)

I, MAGDALENA HAURIE VIGNE, Secretary of the Board of Directors of the
business corporation "COLINA BEDAT, SOCIEDAD DE
RESPONSABILIDAD LIMITADA", " with its registered office at calle Cristo
del Calvario, number 5, 2 derecha, Seville, registered in the Company Register
of Seville in volume 3530, folio 171, page number SE-49550, entry 1, and with
C.I.F.(Corporate Tax Identification Number) B-91226167

HEREBY CERTIFY:

That the Minute Book containing the resolutions of the Company includes a
resolution by the Board of Directors which states literally for the current
purposes:

"At the registered office on the 24th of June 2005.

PRESENT:

All the members of the Board of Directors being present, it is hereby
unanimously RESOLVED:

1. To grant Maria Elena Haurie Relinque power of attorney to act for and on
behalf of the company to carry out any of the following:

To carry out any operations in relation to the current accounts of the
grantor company, including to sign cheques and other documents drawn against



the company; to make deposits and withdrawals; to draw, endorse, intervene in or issue cheques, promissory notes, bills of exchange or other money order documents; to formalise, modify or cancel contracts to open deposits, current accounts, term deposits or any other similar contract; to request certification or details of any of the bank statements of the company; to rent safety deposit boxes or terminate any such contracts; to establish direct debits or credit transfers for payments and deposits; to make or receive transfers; to request, obtain or cancel credit or debit cards in favour of the grantee of this power of attorney, the company or any other person related with the same; to constitute, modify and cancel contracts for the deposit of securities, fixed, variable or mixed income funds or of any other type; to formalise, modify and cancel lease, rental or factoring agreements or of any other kind; to charge fees for collection or payment of any kind of service or obligation assumed by the company or in favour of the same and in general to carry out any of the typical operations, whether credit or debit operations, with credit entities and for any amount, with the exception of those regarding constitution of loans with or without security.

2. To authorise Teresa Relinque Chacón to appear before a Notary Public to execute the corresponding public instrument.

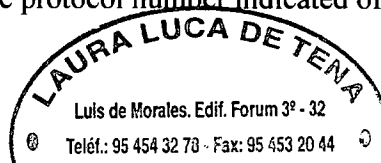
In witness whereof this certificate is issued at Seville on the 24th of June 2005.

APPROVED: THE CHAIRWOMAN THE SECRETARY

[Signature: illegible]

[signature: illegible]

I, the Notary Public, HEREBY ATTEST that THIS IS AN AUTHORISED COPY of the original document with the protocol number indicated of my Records of public



04/2005 SPECIAL NOTARIAL PAPER 6F4516359
[SEAL: NOTARY OFFICE OF PEDRO [STATE STAMP] [stamp: €0.15]
ANTONIO ROMERO CANDAU, SEVILLE)

documents, which I have issued at the request of the party granting this power of attorney
at Seville, on the twenty ninth of June of two thousand and five on four pages of special
notarial paper, Series 6F, numbers 4516362 and the preceding pages in consecutive order.

FEES
BASE:
Numbers: *
Fees: 0

[SEAL: GENERAL COUNCIL OF
SPANISH NOTARIES PUBLIC-
OO76021620]

[Signature: illegible]

[SEAL: NOTARY OFFICE OF PEDRO
ANTONIO (ILLEGIBLE), SEVILLE]

Collected today at Seville
29 Nov 2005

Collected today at Seville
7 Apr 2006

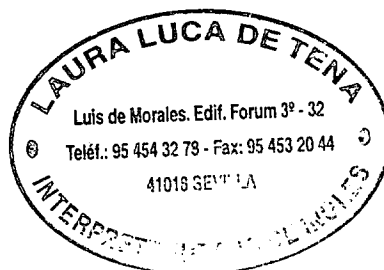
COMPANIES REGISTRY OF SEVILLE PROVINCE

....The above document with today's date was **REGISTERED** in **Volume 3530 of the Companies Section, folio 185 Page number SE-49550, entry 8**; with express exclusion of the person appointed from the Registry of Bankruptcy Resolutions, in accordance with the terms of article 61 bis of the Companies Registry Regulations. Attached is the complementary certification, duly certified by the same Notary Public on the 28th of June 2006.-

At Seville on the 25th of July of 2006

The Registrar,
[SIGNATURE: ILLEGIBLE]

[SEAL: COMPANIES REGISTRY OF
SEVILLE PROVINCE]



THE UNDERSIGNED, COMPANIES REGISTRAR OF SEVILLE PROVINCE.-

HEREBY CERTIFY: That the Company "**COLINA BEDAT, S.L.**" with **C.I.F.(Corporate Tax Identification Number) B-91/226167-;** confers a **POWER OF ATTORNEY** in favour of **MARIA ELENA HAURIE RELINQUE** by virtue of the deed executed at Seville, on the twenty seventh of June of two thousand and five before the Notary Public **Pedro Antonio Romero Candau**, with protocol number 3263, and which was registered at this Registry for which I am responsible on this date, on folio 185 of Volume 3530 of the General Companies Section, Page number **SE-49550**, entry 8.-
All of the above is in accordance with the entry in the Register, to which I refer. And in witness whereof I hereby issue this certificate on one sheet of Registry Paper marked on the reverse side with Series C number 014480. Signed at Seville on the twenty fifth of July of 2006.

[Signature: illegible]

[SEAL: COMPANIES REGISTRY OF
SEVILLE PROVINCE]



COMPANIES SEVILLE

PAGE: 1

**LIST OF DOCUMENTS SENT TO THE BORNE (OFFICIAL GAZETTE OF
THE COMPANIES REGISTRY)**

(ENTRY 1/2006/11.903.0)

DATE: 25/07/2006 TIME: 10.35

COLINA BEDAT SL- B91226167

Grant of Power of Attorney

Person Appointed: HAURIE RELINQUE, MARIA ELENA

Office or Function: Legal Representative

Date of Appointment: 24/06/2005 – Date of termination (**): INDEFINITE

Registry Details:

Volume: 3530 ,Book: 0 , Folio: 185 , Section: 8 , Page : SE 49550

Entry: 8 / Date: 25/07/2006 Year Pre.: 2006

Amount for publication in BORNE : 30.65 5,100P



DOÑA MAGDALENA HAURIE VIGNE, Secretary of the Board of Directors of the trading corporation "**COLINA BEDAT, SOCIEDAD DE RESPONSABILIDAD LIMITADA**", with its registered office at calle Cristo del Calvario, number 5, 2 derecha, Seville, registered in the Companies Registry of Seville, in volume 3530, folio 171, page number SE-49550, entry 1, with C.I.F. (Corporate Tax Identification Number) B-91226167.

CERTIFY:

That the Minute Book containing the resolutions of the Company includes a resolution by the Board of Directors which states literally for the current purposes:

"At the registered office on the 24th of June 2005.

PRESENT:

All the members of the Board of Directors being present, namely Teresa Relinque Chacón, Juan Haurie Briol, Luis Haurie Vigné, Magdalena Haurie Vigné, Juan Andrés Haurie Relinque, María Elena Haurie Relinque and Alejandro Haurie Relinque, it is hereby unanimously **RESOLVED:**

1. To grant Maria Elena Haurie Relinque power of attorney to act for and on behalf of the company to carry out any of the following:

To carry out any operations in relation to the current accounts of the grantor company, including to sign cheques and other documents drawn against the company; to make deposits and withdrawals; to draw, endorse, intervene in or issue cheques, promissory notes, bills of exchange or other money order



documents; to formalise, modify or cancel contracts to open deposits, current accounts, term deposits or any other similar contract; to request certification or details of any of the bank statements of the company; to rent safety deposit boxes or terminate any such contracts; to establish direct debits or credit transfers for payments and deposits; to make or receive transfers; to request, obtain or cancel credit or debit cards in favour of the grantee of this power of attorney, the company or any other person related with the same; to constitute, modify and cancel contracts for the deposit of securities, fixed, variable or mixed income funds or of any other type; to formalise, modify and cancel lease, rental or factoring agreements or of any other kind; to charge fees for collection or payment of any kind of service or obligation assumed by the company or in favour of the same and in general to carry out any of the typical operations, whether credit or debit operations, with credit entities and for any amount, with the exception of those regarding constitution of loans with or without security.

2. To authorise Teresa Relinque Chacón to appear before a Notary Public to execute the corresponding public instrument.

The minutes were then unanimously approved by all those attending."



In witness whereof this certificate is issued at Seville on the 24th
of June 2005.

[Signature: T Relinque]

[signature: M Haurie]

APPROVED: THE CHAIRWOMAN

THE SECRETARY

[SEAL: NOTARY OFFICE OF PEDRO
ANTONIO ROMERO CANDAU, SEVILLE]



**CERTIFICATE OF AUTHENTICATION NUMBER 3303 OF THE
RECORD OF PUBLIC DOCUMENTS.**-----

**I, PEDRO ANTONIO ROMERO CANDAU, Notary Public of the Notary Association of
Seville, HEREBY CERTIFY:**-----

**That the signatures of Magdalena Haurie Vigne, with D.N.I (National Identification
Document) No. 28307180-E and Teresa Delinque Chacón, with D.N.I (National
Identification Document) No. 28222477M affixed in this document are genuine following
their comparison with other signatures in my record books. -----**

At Seville on the twenty eighth of June of two thousand and six.-----

[STANDING AND LEGALISATION STAMP]

**[SEAL: GENERAL COUNCIL OF
SPANISH NOTARIES PUBLIC-
OO77228913]**

[Signature: illegible]

**[SEAL: ROMERO CANDAU
NOTARY OFFICE (ILLEGIBLE),]**

**Relating to entry 8
on Page SE 49550 folio 185, Volume
3530, Book- Companies Section-
Seville, 25th of July 2006**

[SEAL:ILLEGIBLE]

AFFIDAVIT

**I, Laura Luca de Tena Sainz, English sworn translator in the province of Seville, declare
that this is the faithful translation of the Spanish original attached.**

In Seville, on October 14, 2009

APOSTILLA

**Doña Laura Luca de Tena Sainz, Intérprete Jurado de Inglés, certifica que la que antecede
es traducción fiel y completa al inglés de un documento redactado en castellano.**

En Sevilla, a 14 de octubre de 2009.



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Company name: Colina Bedat Address: 1380 Avenue 13 Box 2013 Postcode/Zip Code (required): 91001 Phone, Fax or E-mail (required):		3 Shipment details Total number of packages: 1 Total Weight: 0.25 Dimensions in cm: Length 25 Width 10 Height 10 4 Full description of contents Give content and quantity: Documents	
5 To (Receiver) Company name: Leckman Brothers Equip Bankruptcy Solutions Address: 757 Third Avenue, 3rd floor Postcode/Zip Code (required): 10017 Country: USA Contact person: Leckman Brothers Phone, Fax or E-mail (required): (866) 879-0688		6 Non-Document Shipments Only (Customer Requirement) Attach the original and four copies of a Proforma or Commercial Invoice Shipper's VAT/GST number: PROACTIVE Declared Value (if not on commercial invoice) TYPE OF EXPORT: <input type="checkbox"/> Permanent <input type="checkbox"/> Repair/Return <input type="checkbox"/> Temporary Destination duties/taxes (if left blank receiver pays duties/taxes) 7 Shipper's agreement (Signature required) Signature: [Signature] Date: 23/10/09	
8 Services <input type="checkbox"/> Domestic <input type="checkbox"/> International <input type="checkbox"/> Express <input type="checkbox"/> Express 9 (10:30 to the USA) <input type="checkbox"/> Express 12 <input type="checkbox"/> Express Worldwide <input type="checkbox"/> Express Envelope <input type="checkbox"/> Other:		9 Insurance Insured: INSURED Other: PP CURRENCY: USD TOTAL: 98696 TRANSPORT COLLECT STICKER No.	

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United States Bankruptcy Court/Southern District of New York

Lehman Brothers Holdings Claims Processing Center
c/o Epiq Bankruptcy Solutions, LLC
FDR Station, P.O. Box 5076
New York, NY 10150-5076

In Re:
Lehman Brothers Holdings Inc., et al.,
Debtors.

Chapter 11
Case No. 08-13555 (JMP)
(Jointly Administered)

**LEHMAN SECURITIES PROGRAMS
PROOF OF CLAIM**

Filed: USBC - Southern District of New York
Lehman Brothers Holdings Inc., Et Al.
08-13555 (JMP) 0000048658



Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on <http://www.lehman-docket.com> as of July 17, 2009

Name and address of Creditor: (and name and address where notices should be sent if different from Creditor)

EPHRAIM MCCABE

CORTIJO DE SAN CRISTOBAL, LOS ALTOS DE LOS MONTEROS, 29600 MARBELLA, MALAGA (SPAIN)

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Filed on: _____

Telephone number:

Email Address: c.martindmym- abogados.com

Name and address where payment should be sent (if different from above)

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Telephone number:

Email Address:

1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates.

Amount of Claim: \$ 2.830.200,00 \$ (Required) EURUSD X-Rate Applied: 1,4151 (09/15/08) ECB

☐ Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.

2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the ISINs for the Lehman Programs Securities to which this claim relates.

International Securities Identification Number (ISIN): XS0282208049 (Required)

3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates.

Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:

CA01136

(Required)

4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers.

Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number: CLEARSTREAM 89545

(Required)

5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.

Date: 23/10/09

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

EM McCabe

FOR COURT USE ONLY

FILED / RECEIVED

OCT 27 2009

EPIQ BANKRUPTCY SOLUTIONS, LLC

"MARQUE CON UNA X" EL SERVICIO ELEGIDO (PARA ENTREGAS EN SÁBADO UTILICE EXCLUSIVAMENTE SEUR 8:30 Y SEUR 10)
"MARQUE COM X" O SERVIÇO ESCOLHIDO (PARA ENTREGAS AOS SÁBADOS UTILIZE EXCLUSIVAMENTE SEUR 8:30 E SEUR 10)

SEUR MESMO DIA

SEUR 13:30

SEUR INTERNACIONAL COURIER

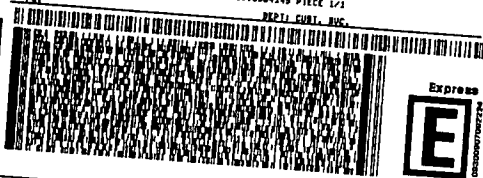
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MIAMI, FL 33128
UNITED STATES US

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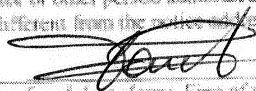
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United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		LEHMAN SECURITIES PROGRAMS PROOF OF CLAIM	
In Re: Lehman Brothers Holdings Inc., et al. Debtors	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000045318	
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009			
Name and address of Creditor (and name and address where notices should be sent if different from Creditor): GLOBAL WORLD INVESTMENT, S.L. CALLE MURCIA, 3 GUADALMINA BAJA, 29670 SAN PEDRO DE ALCANTARA, MALAGA (SPAIN) Calle Murcia, 3 Bajas - (Guadalupe Baja) 29670		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____	
Telephone number: _____ Email Address: _____ Name and address where payment should be sent (if different from above): Telephone number: <u>952 88 96 40</u> Email Address: <u>mc @ ruficwsky.com</u>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates. Amount of Claim: \$ <u>3,537,750.00</u> (Required) EURUSD X-Rate Applied: 1.4151 (09/15/08) ECB			
<input type="checkbox"/> Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.			
2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the ISINs for the Lehman Programs Securities to which this claim relates. International Securities Identification Number (ISIN): <u>XS0282208049</u> (Required)			
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates. Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number: <u>CA01151</u> (Required)			
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number: <u>CLEARSTREAM 16632</u> (Required)			
5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.		FOR COURT USE ONLY <div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> FILED / RECEIVED <p style="font-size: 1.2em; margin: 5px 0;">OCT 23 2009</p> EPIQ BANKRUPTCY SOLUTIONS, LLC </div>	
Date: <u>22/10/09</u>	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  Tarek MOHSEN		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.			

29

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The questions on the Proof of Claim form include instructions for completing each question. The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS

Debtor

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is the person, corporation, or other entity owed a debt by the debtor on the date of the bankruptcy filing.

Claim

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. § 101(5). A claim may be secured or unsecured, reduced to judgment or not, liquidated or unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal or equitable.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the Claims Agent at the following address:

Lehman Brothers Holdings Claims Processing
c/o Epig Bankruptcy Solutions, LLC
PDR Station, PO Box 5076
New York, NY 10150-8076

Lehman Programs Security

Any security included on the list designated "Lehman Programs Securities" available on <http://www.lehman-banket.com> as of July 17, 2009.

INFORMATION

Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim, or you may access the Claims Agent's system (<http://www.lehman-banket.com>) to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

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